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PTO/SB/021 (08-00)  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/833,017	
	Filing Date	April 10, 2001	
	First Named Inventor	Dennis CVITKOVITCH	
	Group Art Unit	1642	
	Examiner Name	*	
Total Number of Pages in This Submission	2	Attorney Docket Number	1889-00401

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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment (for an application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Filing Receipt, and Acknowledgement Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm Or Individual Name	CAROL G. MINTZ CONLEY ROSE & TAYON
Signature	<i>Carol G. Mintz</i>
Date	November 28, 2001

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: November 28, 2001.			
Typed or Printed Name	Cathy Lamb		
Signature	<i>Cathy Lamb</i>	Date	November 28, 2001

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Dennis Cvitkovitch et al.

SERIAL NO.: 09/833,017

FILED: April 5, 2001

FOR: Signal Peptides, Nucleic  
Acid Molecules and Methods  
For Treatment of Caries

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GROUP ART UNIT - 1642

EXAMINER:

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**REQUEST FOR CORRECTED FILING RECEIPT**

Atty. Dkt. No. 1889-00401  
Date: November 28, 2001

Commissioner for Patents  
Washington, D.C. 20231  
Attention: Office of Initial Patent Examination  
Customer Service Center

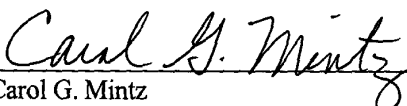
Sir:

Attached is a copy of the official *Filing Receipt* received from the PTO in the above application for which issuance of a corrected *Filing Receipt* is respectfully requested. The *Filing Receipt* is in error in that it states the filing date as September 17, 2001. The *Filing Receipt* should read

"Filing Date: April 10, 2001".

The correction requested is not due to any error by applicant and no fee is due.

Respectfully submitted,

  
Carol G. Mintz  
Reg. No. 38,561  
Conley, Rose & Tayon, P.C.  
P. O. Box 3267  
Houston, Texas 77253-3267  
(713) 238-8000

AGENT FOR APPLICANT



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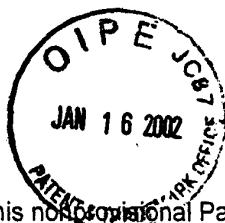
APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/833,017	09/17/2001	1642	807	1889-00401✓	19	18	2

04/10/2001

23505 *CGM*  
CONLEY ROSE & TAYON, P.C.  
P. O. BOX 3267  
HOUSTON, TX 77253-3267

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NOV 09 2001



CONFIRMATION NO. 8365

UPDATED FILING RECEIPT



\*OC000000007017280\*

Date Mailed: 11/02/2001

Receipt is acknowledged of this non-provisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

Applicant(s)

Dennis Cvitkovitch, Oakville, CANADA;  
Peter C.Y. Lau, Richmond Hill, CANADA;  
Yung Hua Li, Etobicoke, CANADA;

Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/269,949 02/20/2001

Foreign Applications

CANADA 2,302,861 04/10/2000  
CANADA 2,332,733 02/20/2001

If Required, Foreign Filing License Granted 05/17/2001

Projected Publication Date: 02/14/2002

Non-Publication Request: No

Early Publication Request: No

**\*\* SMALL ENTITY \*\***

Title

Signal peptides, nucleic acid molecules and methods for treatment of caries

Preliminary Class

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Bib Data Sheet

CONFIRMATION NO. 8365

<b>SERIAL NUMBER</b> 09/833,017	<b>FILING DATE</b> 04/10/2001 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1645	<b>ATTORNEY DOCKET-NO.</b> 1889-00401
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## APPLICANTS

 Dennis Cvitkovitch, Oakville, CANADA;  
 Peter C.Y. Lau, Richmond Hill, CANADA;  
 Yung Hua Li, Etobicoke, CANADA;

## \*\* CONTINUING DATA \*\*\*\*\*

THIS APPLN CLAIMS BENEFIT OF 60/269,949 02/20/2001

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

 CANADA 2,302,861 04/10/2000  
 CANADA 2,332,733 02/20/2001

 IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/17/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 19	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

## ADDRESS

23505

## TITLE

Signal peptides, nucleic acid molecules and methods for treatment of caries

<b>FILING FEE RECEIVED</b> 807	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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